



**HAWAII STATE ETHICS COMMISSION**  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
TEL: 587-0460 FAX: 587-0470  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Fujii	Raymond	H.	833-2190
MAILING ADDRESS (Street)			FAX
3049 Ualena Street, Suite 705			833-5344
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96819	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
RHF, Inc.			833-2190
MAILING ADDRESS (Street)			FAX
3049 Ualena Street, Suite 705			833-5344
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96819	

PART II ORGANIZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE
Painting Industry of Hawaii Labor Management Cooperation Fund	941-0991
MAILING ADDRESS (Street)	FAX
2240 Young Street	955-9091
(City)	(State)
Honolulu	Hawaii
(Zip Code)	96826
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
Dennis Kawasaki	523-9411
MAILING ADDRESS (Street)	FAX
222 S. Vineyard Street, PH4	533-6789
(City)	(State)
Honolulu	Hawaii
(Zip Code)	96813

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

X

(Signature of Lobbyist)

January 9, 2007

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
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Lynn Kinney

Chairman

NAME OF ORGANIZATION (if applicable)

Painting Industry of Hawaii  
Labor Management Cooperation Fund

TELEPHONE

941-0991

MAILING ADDRESS (Street)

2240 Young Street

FAX

955-9091

(City)

Honolulu

(State)

Hawaii

(Zip Code)

96826

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

January 11, 2007

(Date)